

State of Washington Application for a Water Right



For Ecology Use
Fee Paid 10-00

Date 10.13.99.

Please follow the attached instructions to avoid unnecessary delays99

Section 1. APPLIC						
Name Silver Spring	states (morning ASS	Ciation Home Tel:	(360)	629 -	4619
Mailing Address P.O. B.	5x 145	003	Work Tel:	()	Same	
City Stanwood	State [134]	Zip+4_707	12 + FAX	: ()	
Section 2. CONTAC						
Name			Home Tel:	())	
Mailing Address			Work Tel:	()		
City	State	Zip+4	+ FAX	: ()	
Relationship to applicant						
Section 3. STATEM	MEN'T OF IN	INDIST!				
The applicant requests a per cubic feet per second) from	mit to use not mo	re than	ground water source	(check o	gallons pe	r minute or
of Domestic hom	e Supply 1	Pultiple do	m. Supply - a	N inus	ATTA	CH A "LEGAL"
DESCRIPTION OF THE	PLACE OF USE	. (See instructi	ons.) NOTE: A tax po	rcel numi	ber or a pla	t number is not
<i>ufficient.</i> Estimate a maximum annua	l quantity to be us	ed in acre-foot	per year:	acre	Feet	
Check if the water us	se is proposed for	a short-term pro	ject. Indicate the peri	od of time	e that the wa	ater will be needed
From/_	/ to					
Section 4. WATER	SOURCE					
If SURFACE WATER			If GROUNDWAT	EIR		
Name the water source a	and indicate if st	ream enring	A permit is desire		1 Coxistin	well
lake, etc. If unnamed, w "unnamed stream," etc.:	rite "unnamed sp		A permit is desire	1101	(car)	g/wellys).
Number of diversions: _						
Source flows into (name	of body of water	er):	Size & depth of w	ell(x):		
Source nows into (name	or body of water		8"		1 -27	20010
			8	380	00-6). F. 124 -
LOCATION	Haling Haling States and States		herrasia kun kun kata kata da kata kata kata kata kata k	antigraphicales.	an distanció	
Enter the north-south an section corner: NE, In Snohomish	d east-west distant 1/4 N.E. 1/4 of County, St.	inces in feet from section at e of W	om the point of diversity	rsion or 32 N, N	withdrawa Zange 4	to the nearest
						e is platted, complete
1/4 of 1/4 of	Section Townsh	ip Range (E/W) County		bel	ow:
N/E N/E	35 32 N	4 E/w.1	M. Snohomish	Lot	Block	Subdivision
11/6	55 54/1	1 2/0,1	9/10/10/10/10			
For Ecology Use Date Recei	ved: //2 / 3 · 5	29 Di-	ty Date: 10-13 - 9	3		
		Hilon				
SEPA: Exempt/Not Exempt Date Accepted As Complete //	FERC License #	no	Dept. Of H	th Granes		
Date Accepted As Complete //	11: 97	By D	ate Returned		Ву	WRIA:

ECY 040-1-14 Rev. 7/97 ** f **APPLICATION**

Appl. No.: 61-280-58 C1-280-8

Sec	ction 5. GENERAL WATER SYSTEM INFORMATION		
A.	Name of system, if named: Silver Springs Estates		
B. Sing sing sing sing sing sing sing sing s	Briefly describe your proposed water system. (See instructions.) Water System of functional at 50 GP.M. with 34 alloted Service of ce. 1969. Well rights per mit # G1-22554P. E.P.A. E.P	tem is in place on nections. at U.C.H. required is old and under springs tem to current of This	ace Operational lations lations where lable lascerations tregulations application
C.	Do you already have any water rights or claims associated with this property or system PROVIDE DOCUMENTATION. 61-2254P (See attached)	m? XYES	□NO
	ction 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFompleted for all domestic/public supply uses.)	ORMATION	
Α.	Number of "connections" requested: 34 Type of connection (Homes, A	es partment, Recreation	nal, etc.)
B.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water County Health Department.	☒ YES systems are identifie	A TOTAL CONTRACTOR OF THE STATE
Cor	nplete C. and D. only if the proposed water system will have fifteer	or more conne	ctions.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved.	☐ YES	
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved.	☐ YES	□NO
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMAT ompleted for all irrigation and agriculture uses.) Total number of acres to be irrigated: List total number of acres for other specified agricultural uses: Use Acres	ION	
	Use Acres Use Acres		
C.	Total number of acres to be covered by this application:		
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).		
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.: 	☐ YES	
E.	Farm uses: Stockwater - Total # of animals Animal Type Dairy - # Milking # Non-milking	(If dairy cattle, see l	pelow)

Sec	ction 8. WATER STORAGE	
Will y	you be using a dam, dike, or other structure to retain or store water?	□ YES ⋈NO
point,	E: If you will be storing 10 acre-feet or more of water and/or if the water depth we, and some portion of the storage will be above grade, you must also apply for a voir permit application from the Department of Ecology.	vill be 10 feet or more at the deepe reservoir permit. You can get a
Sec	etion 9. DRIVING DIRECTIONS	
Provided Smiles Let Sy:	de detailed driving instructions to the project site. From Seattle.) No okey Pt. to Exit 312. West to EAST Sunday Left turn - 1 mile to 12 Th Ave N.W. o Left turn of turn at Silver Springs Way. Well house stem has been in place since 1969. D.O.H.	Jorth I-5 past Marysvi ake Dr. (14 mi W. of 1 n I mile to 252 d is at intersection. permit is Green.
Sec	etion 10. REQUIRED MAP	
Α.	Attach a map of the project. (See instructions.)	
Α.	Attach a map of the project. (See mistructions.)	
Sec	ction 11. PROPERTY OWNERSHIP	
A.	Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(so of the owner(s): Residential area in rural environme	
В.	Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:	Yes 🗆 No
to promi	tify that the information above is true and accurate to the best of my knowle ocess my application, I grant staff from the Department of Ecology access to itoring purposes. Even though I may have been assisted in the preparation of loyees of the Department of Ecology, all responsibility for the accuracy of the	the site for inspection and f the above application by the
Appli	Zussell M. Carlo 9/32 icant (or authorized representative) Date	199

Silver Springs Estates
Landowner for place of use (if same as applicant, write "same")

200		
e are returning your application for the following reas	on(s)	
	011(8).	
Examination fee was not enclosed		APPLICANT PLEASE
		RETURN TO CASHIER,
		PO BOX 5128, LACEY, WA
		98509-5128
Section number(s)	is/are	APPLICANT PLEASE
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complete		APPROPRIATE REGIONAL
		OFFICE
		OTTICE
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(date).	Date	
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lease provide the additional information requested about (date).		
(date).		
(date).		
(date).		

Use this page to continue your answers to any questions on the application. Please indicate section number

before answer.

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

CASCADE SURVEYING & ENGINEERING. INC.



102 East Division Street P.O. Box 326 ARLINGTON, WASHINGTON 98223

OCT 2 7 1999

Date OCT. 25, 1999

(206) 435-5551 FAX (206) 435-4012

DEPT. OF ECOLOGREPI UT ECULUGY Subject

3190 160th AVE SE

BELLEVUE, WA, 98008-5452

ATTN: SHIELA BAKER

ENCLOSED PLEASE FIND THE ORIGINAL APPLICATION YOU REQUESTED

RANDY DEVOIR

Please reply

No reply necessary

SIGNED

CASCADE SURVEYING & ENGINEERING, INC.

102 East Division Street P.O. Box 326 ARLINGTON, WASHINGTON 98223



(206) 435-5551

OCT 1 3 1999 Date 10-11-99

TO DEPARTMENT OF ECOLOGY NORTHWEST REGIONAL OFFICE FILTE SPRINGS ESTATES 3190-160TH AVE. SE BELLEVUE, WA. 98008-5452

COMMUNITY ASSOC.

PLEASE NOTE:

THE PURPOSE FOR THIS WATER RIGHT APPLICATION 15 TO HAVE A MAXIMUM TOTAL OF 81 GALLONS DER MIN. FOR THE EXISTING WATER SYSTEM, WITH NO INCREASE TO THE ACRE-FEET DER GEAR.

THE EXISTING SYSTEM (PERMIT #G1-22554P) 15 CERTIFIED FOR 50 GAL/MIN AND 30.6 AC-FT/YR.

THANKIYON FOR YOUR TIME.

Rease reply
No reply necessary

SIGNED ELS Mall



ECY 040-1-14

Rev. 7/97 * * f ...

APPLICATION

State of Washington Application for a Water Right



copy

For Ecology Use			
Fee P	aid 🖢	10.00	
Date	10-	13-99	
	400	ALL	

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICA	NT - PERSON, ORGA	NIZATION, OR V	WATER SYSTEM
Name Silver Spring	Estates Community Ass	ciation Home Tel: (_	360)629 - 4619
Mailing Address P.O. Bo	x 745	Work Tel: (_	Same.
City Stanwood	State [12] Zip+4_983_	<u>72</u> + FAX: (360)629 - 4619 Same-
Section 2. CONTAC	T - PERSON TO CALI	ABOUT THE A	PPLICATION
Same as above			A Maria
Name		Home Tel: (
City	State Zip+4	+ FAX: (
Relationship to applicant			
Section 3. STATEM	DINTE OF TINTED TO		
The applicant requests a peri	nit to use not more than	31 GPM.	(callons per minute or
cubic feet per second) from	n a surface water source or	ground water source (check only one) for the purpose(s)
of <i>Domestic home</i>	-Supply- LACE OF USE (See instructi	ions) NOTE: A tax pare	. ATTACH A "LEGAL" rel number or a plat number is not
sufficient			
Estimate a maximum annual	quantity to be used in acre-foot	per year:	octe-fee c
☐ Check if the water use	is proposed for a short-term pro	ject. Indicate the period	of time that the water will be needed
From /	_/ to/		
110111			
Section 4. WATER S	SOURCE		
outronicities a commission of more consistent and account of the commission of the c		A Company of A Commission of the Commission of t	and a summary of the
If SURFACE WATER		If GROUNDWATER	
	nd indicate if stream, spring,	A permit is desired t	for 1 (existing) well(8).
lake, etc. If unnamed, wri "unnamed stream," etc.:	te "unnamed spring,"		V
uimamed stream, etc			
Number of diversions:			
Source flows into (name of	of body of water):	Size & depth of well	
		8" 3	880' GOGANI
LOCATION			
Enter the north-south and	east-west distances in feet fr	om the point of divers	ion or withdrawal to the nearest
section corner: NE; 1/	4 NE. 1/4 of Section	35, Township 3	ion or withdrawal to the nearest 2 N, Range 4 E. Wolh.
in Snohomish C	WINTU STATE OF IN	X	그
	ouncy) State of the		
[三] 24 章 [suncy, state or to		If location of source is platted, complete
1/4 of 1/4 of So	ection Township Range (E/W		If location of source is platted, complete below:
	ection Township Range (E/W	County	If location of source is platted, complete
N/E A/E		County	If location of source is platted, complete below:
NE NE 3	ection Township Range (E/W	7) County M. Snehemish	If location of source is platted, complete below: Lot Block Subdivision
NE NE 3	ection Township Range (E/W	M. Singhamish ity Date:	If location of source is platted, complete below: Lot Block Subdivision
NE NE 3 For Ecology Use Date Receive SEPA: Exempt/Not Exempt Fi	ection Township Range (E/W	County No. Snohemish ity Date: Dept. Of Heal	If location of source is platted, complete below: Lot Block Subdivision

Appl. No.: _

DC	eculous: Generale Wateronsilous antorior	
A.	Name of system, if named: Silver Springs Estate	tes
B. Since Si	Briefly describe your proposed water system. (See instructions.) and functional at 50 GPNI. with 34 allote ince 1969. Well rights permit # Q1-225 equire 80 GPM. to service 34 connections. Dystem ID. # 79276Y and MUST BE READON. Ooth owner # 5387 is prepared to up and respectfully rearliest. possible	water system is in place
C.	Do you already have any water rights or claims associated with this PROVIDE DOCUMENTATION. 61-22554P (See attached)	s property or system? YES \(\sum \) NO
	ection 6. DOMESTIC/PUBLIC WATER SUPPLY S Completed for all domestic/public supply uses.)	SYSTEM INFORMATION .
Α.	Number of "connections" requested: 34 Type of conn	ection
B.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note County Health Department.	≥ YES □ NO Regional water systems are identified by your
Cor	omplete C. and D. only if the proposed water system w	ill have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please at	☐ YES ☐ NO tach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please at	☐ YES ☐ NO tach the current approved version of your plan.
400,000	ection 7. IRRIGATION/AGRICULTURAL/FARM Completed for all irrigation and agriculture uses.) Total number of acres to be irrigated:	INFORMATION
В.	List total number of acres for other specified agricultural uses:	
	Use Acres	
	Use Acres	
	Use Acres	
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	If yes, enter permit no.:	
E.	Farm uses: Stockwater - Total # of animals Animal Type	(If dairy cattle, see below)
	Dairy - # Milking # Non-milking	

Section 8. WATER STORAGE	
Will you be using a dam, dike, or other structure to retain or store water?	□ YES ⋈NC
NOTE: If you will be storing 10 acre-feet or more of water and/or if the point, and some portion of the storage will be above grade, you must also reservoir permit application from the Department of Ecology.	
Section 9. DRIVING DIRECTIONS	
Provide detailed driving instructions to the project site. From Section Smokey Pt. to Exit 312 a (vest to EAST 3) Left turn - 1 mile to 12 th Ave N.W. o. L. Left turn at Silver Springs Way. Well System has been in place since 1969.	ottle.) North I-5 past Marysvi anday Lake Dr. (14 mi w. of 1 eft turn I mile to 2522, I house is at intersection. DOH. permit is Green.
Section 10. REQUIRED MAP	
A. Attach a map of the project. (See instructions.)	
Section 11. PROPERTY OWNERSHIP	
A. Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provious of the owner(s): Residential area in rural envi	de the name(s) and address(es)
B. Does the applicant own the land on which the water source is local If no, submit a copy of agreement:	ated? YES □ NO
I certify that the information above is true and accurate to the best of to process my application, I grant staff from the Department of Ecolomonitoring purposes. Even though I may have been assisted in the premployees of the Department of Ecology, all responsibility for the accurate to the best of the process.	ogy access to the site for inspection and reparation of the above application by the
Applicant (or authorized representative)	9/30/99 Date

Silver Springs Estates
Landowner for place of use (if same as applicant, write "same")

		9. - X	
We are returning your application for the fo	ollowing reason(s):		
Examination fee was not enclosed			APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)ncomplete		is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:			
Please provide the additional information		d return your	application by
1			
ology staff		_ Date	
cology is an Equal Opportunity and Affirm	native Action emplo	yer.	
receive this document in alternative form (360) 407-6006 (TDD).	nat, contact the Wate	er Resources I	Program at (360) 407-6604 (Void

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

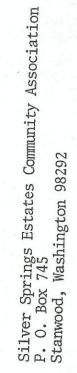
APPLICATION



STATE OF WASHINGTON DEPARTMENT OF ECOLOGY

CERTIFICATE OF WATER RIGHT

Surface Wa	iter (Issued in accordance with the amendments thereto, and the	e provisions of Chapter 1 rules and regulations of	17, Laws of Washingtor the Department of Ecol	n for 1917, and ogy.)
▼ Ground Wa	iter (Issued in accordance with the amendments thereto, and the	e provisions of Chapter 2 rules and regulations of	63, Laws of Washingtor the Department of Ecol	n for 1945, and ogy.)
PRIORITY DATE	APPLICATION NUMBER	PERMIT NUMBER	R CE	RTIFICATE NUMBER
July 30, 1975	G1-22554	G1-2	2554P	G1-22554C
to the second second				
NAME SILVER SPRINGS ESTATES	S COMMUNITY ASSOCIATION	ON		
ADDRESS ((STREET)	(CITY)		(STATE)	(ZIP CODE)
P. O. Box 745	Stanwood		Washington 982	
This is to certify that the hof a right to the use of the subject to the provisions couse of said waters has been firmed by the Department of	public waters of the State ontained in the Permit issues perfected in accordance w	e of Washington as ted by the Departi with the laws of th	s herein defined, a nent of Ecology,	nd under and specifically and that said right to the
	PUBLIC WATER	O BE APPROPRIATE		
SOURCE				
Well (8" x 381')				
TRIBUTARY OF (IF SURFACE WATERS)				
MAXIMUM CUBIC FEET PER SECOND	MAXIMUM GALLONS	PER MINUTE	MAXIMUM ACRE-I	
	50		3	60.6
QUANTITY, TYPE OF USE, PERIOD OF Community Domestic Sup		34 homes)		
	LOCATION OF DI	VERSION/WITHDRAW	IAL	
APPROXIMATE LOCATION OF DIV 100 feet south and 105		ortheast corner	of Sec. 35.	
LOCATED WITHIN (SMALLEST LEGAL	SUBDIVISION) SECTION	TOWNSHIP N. RAI	NGE, (E. OR W.) W.M. V	V.R.I.A. COUNTY
NE 1/4 NE 1/4	35	32	4 E	5 Snohomish
	RECORDED	PLATTED PROPERT		
от	BLOCK		F PLAT OR ADDITIO	N)
			ngs Estates P1	
LEC	GAL DESCRIPTION OF PROP		THE RESERVE TO SHARE THE PARTY OF THE PARTY	
Plat of Silver Springs				



VOI 1245 PAGE 282

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1978 JAN 20

7801200367

The right to the use of the water aforesaid hereby confirmed is restricted to the lands or place of use herein described, except as provided in RCW 90.03.380, 90.03.390, and 90.44.020.

This certificate of water right is specifically subject to relinquishment for nonuse of water as provided in RCW 90.14.180.

Given under my hand and the seal of this office at

Redmond

Washington, this ... 13th... day

January January

CONTRACTOR SAME FOR AUTOUR

....., 19..78......

Department of Ecology

by

Flit d. Melomish

ROBERT K. McCORMICK, Regional Manager

FOR COUNTY USE ONLY

STATE OF WASHINGTON DEPARTMENT OF ECOLOGY

PROOF OF APPROPRIATION OF WATER

GI-22554		PERMIT	NUMBER 1-22554P
NAME OF PERMITTEE	o Paul no Maranga ya Masa ah Salama, ee ee ee ka ahaa daa ee Maranga ah dada ah magalaa ah ee Afrikaa ah ee ah	an can an angga a agga at the total angga at the transport of the contract of	
Silver Springs Estates Communi	ty Association	n .	
	nwood	Washington	(ZIP COD) 98 2 92
ACTUAL SOURCE OF APPROPRIATION		MSBITTIECOTI	JSEJ C
well (8" X 381°)			
community domestic supply - cor	ntingously /2	4 homos	Good and all the control of the cont
DATE WATER WAS COMPLETELY APPLIED TO PERMITTED USE		SATION: NUMBER OF ACRES AC	TDALLY JRBIGATED
August 1, 1977		N/A	
IF SOURCE IS A WELL, IS AN ACCESS PORT NOW INSTALLED NO	MONTHS DURING	WHICH WATER IS USED	
some transporter and the transporter and trans	Probaggapan (gashedd Earl Tryggendoch 7 (Sand Wildel) o'r (gyennodd Sangapassag) Y choles (dd	miles - Bengil Annexes - Open State of the Annexes - Period State of the Annexes - Open State of the Annexes - Op	palament der na deutlement Mandadellemaan vaan over relacionation (ME) in additional objevierend veglere
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CTUAL AMOUNT WITHDRAWN OR DIVERTED FROM PERMANENT S	SYSTEM SPM		
	CFS 50		
HAVE ALL PROVISIONS AS RELIGIRED BY PERMIT BEEN ACCOMPLIS	SHED IF MO. EXPLAIN	effected to authorize it consistent with the consistence of the consis	Japan (1896) august (1 - 1 contribitar a tra, acrain alle con 17 cht au meirich et au maan (1827) au
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LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS US	regionale como monocomicamento en accompanione de la como de la co	CLIEFT LE NICCE CON DV	angun 1964 - Aran 1985-ka angun pangun angun 1987 ka ngan pangun pangun 1986 kao ang kabanasa sa sa
LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS US	SED TOSE ADDITIONAL	SHEET IF NECESSARY	
Located within NE 1/4 NE 1/4 of in Smohomish County, Washington		rownship 32 N. Ra	inge 4 E W.M.
The state of the s			
그 이 사람들은 사람들이 얼마를 하는 것이다.			
	As 49 m. n. v.p.) and political design confidence of the confidenc	agenes and it begins and in the passes confidence on the services of contracting and an experience of the contracting and	Charles and show that and charles to suppose the fact is not been following and the process of the support of t
STATE OF WASHINGTON,			
county of SNO LOMISh ss.			** If
IT buongast Musillias	bein	g first duly sworn, depos	e and say that I have
read the above and foregoing proof of appropria	tion: that I know th	ne contents thereof: and t	hat the facts therein
stated are true			
			1
IN WITNESS WHERE OF, I have hereunto set	my hand thisl.C.	The day of LOUCH	5 ex, 19 66
그리 보다 그 있다면 내게 그렇게 보고하다고 뭐	0 0	1.1 - 1.1	
	wordhill.	M ROLL Igniture	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
그 아이지 않는 이렇게 다 가는 것이다.		Permittige Signature	A.
Subscribed and sworn to before me this	1071 day of	thousand.	10 22
		Mal	Maria Cara Cara Cara Cara Cara Cara Cara
하셔츠 마음 교육 네티트 이번 때문을 되었다.	2	March I March	and the second second
요즘 보고 있는 것이 하나 없는 것이 없는 것이다.		Notary Public	1
rcv 0h0-1-26			